PTO/SB/30 (08-00)

Prussizio (08-00)
Approved for use through 10/31/2002. OMB 0851-0031
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

REQUEST	Application Number	10/812,660			
FOR	Filing Date	March 29, 2004			
CONTINUED EXAMINATION (RCE)	First Named Inventor	STEPHENS, Adrian			
TRANSMITTAL	Group Art Unit	2619			
Subsection (b) of 35 U.S.C. § 132, effective on May 29, 2000, provides for continued examination of an utility or plant application	Examiner Name	FOUD, HICHAM B			
provides for continued examination of an unity or pean apparation filed on or after June 8, 1995. Sea The American Inventors Protection Act of 1999 (AIPA)	Attorney Docket Number	P-9630-US			
This is Bound for Continued Exemplation (RCE) under 37 C.E.R. 8.1.114 of the above-identified application.					

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application was fled prior to May 29, 2000, applicant may 7 C.F.R. § 1.114 is effective on May 29, 2000. If the above-identified application was fled prior to May 29, 2000, applicant may

	the pat Rule 6		nt provisions of the Al (Aug 16, 2000); Inte				and Provisional Application Practic 1233 Off. Gax. Pat. Office 47 (Apr.	
1.	Submis	sion require	d under 37 C.	F.R. § 1.114				
a.		eviously sub	mitted				4 440	n April 21.
	i. 🛚	(Any unentere	ed amendment(s) re	ferred to above will be ent	tered).		1.116 previously filed o	2008
	ii. 🔲	Consider	the argument	s in the Appeal Bri isclosure Stateme	ief or F	Reply I ∆nril	Brief previously filed or	'
	iii. 🛛		29, 2008	isclosure Stateme	int mec	- Apin		
b.	iii iv	closed Amendmo Affidavit(s Information	s)/Declaration	s) Statement (IDS)				
2.	Miscell							ED 04 400(a)
a.							requested under 37 C.	
b.		a period of her	months	. (Period of suspension s	shall not e	exceed 3	months; Fee under 37 C.F.R. §.	17(i) required)
3.	Fees		nder 37 C.F.R. § 1.1	7 (D) is required by 37 C.	.F.R. § 1.	114 who	on the RCE is flied.	
a.	⊠ Th	e Director is	hereby author	rized to charge the	e follo	wing f	ees, or credit any over	payments, to
	De		nt No. 50-335					
	i. 🖂	RCE fee	requirea unae	r 37 C.F.R. § 1.17 7 C.F.R. §§ 1.136 and 1.	(e)			
	# 6	Other	TOT BITTLE TEC (7 C.I .IV. 99 1.100 and 1.	,			
b.			mount of _\$			enclo	osed	
C.	☐ Pa	yment by cr	edit card (Form	PTO-2038 enclosed)				
SIGNATURE/OF APPLICANT, ATTORNEY, OR AGENT REQUIRED								
Nan	e (Print/		Caleb Polla				ation No. (Attorney/Agent)	37,912

١	SIGNATURE/OF APPLICANT, ATTORNEY, OR AGENT REQUIRED							
Name (Print/Type) /Caleb Pollack		Registration No. (Attorney/Agent)	37,912					
Signature				Date August 18, 2008				

Butden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patient and Tradsmark Office, Westington, DC 20231, DO NOT SEND FEES OR COMMETEE FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Assistant Commissioner for Patients, Westington, DC 20231.